

301 Centennial Mall South, First Floor
PO Box 94963
Lincoln, NE 68509-4963
www.appraiser.ne.gov
402-471-9015

Check Number:		
Receipt Number:		
ASC Appraiser Registry		
Checked for Listed Owners:		
Processed By:	Date:	
For Board Use Only		

FEDERALLY REGULATED APPRAISAL MANAGEMENT COMPANY NEBRASKA REPORTING FORM

PROCESSING AND ASC NATIONAL REGISTRY FEES

PROCESSING FEE DUE WITH REPORTING FORM: \$350.00
ASC NATIONAL REGISTRY FEE DUE: \$25.00 X number of AMC appraisers reported

APPRAISAL MANAGEMENT COMPANY INFORMATION

	ting Form:						
	erally Regulated AMC Identification s is not the AMC's first report):						
Employer Ider	ntification Number (EIN):						
Legal Name:							
ANAC Tunos	☐ Single State (panel of more than 15 AMC appraisers)						
AMC Type:	☐ Multi-State (panel of 25 or more AMC appraisers in two or more states)						
Business Addr	ess:						
	PO Box or Street Number	City	State	Zip Code + 4			
E-Mail Address		Area Code + Phone Number		Fax Number			
State of Domi	cile:						
	AME nt will be doing business in Nebraska under any other e number. (Use a separate sheet if necessary)	name(s), then all such names must k	oe stated, w	ith address			
If the applicar	nt will be doing business in Nebraska under any other e number. (Use a separate sheet if necessary)	name(s), then all such names must b	oe stated, w	ith address			
If the applicar and telephon Other name:	nt will be doing business in Nebraska under any other e number. (Use a separate sheet if necessary)	name(s), then all such names must b	oe stated, w	Zip Code + 4			

CONTACT PERSON

Contact person to serve as main contact for all communication with the Appraiser Board.

Name:			
	Last	First	Middle
Address:			
PO Bo.	x or Street Number	City	State Zip Code + 4
E-Mail Address		Area Code + Phone Number	Fax Number
OWNERSHIP			
		rt, directly or indirectly, owned by any per	
appraiser license or certificate	refused, denied, c	ancelled, surrendered in lieu of revocation	i, or revoked in any State?
☐ YES ☐ NO If the answe	r is yes, provide own	er names and contact information on a separat	te sheet.
Annual ASC National Registry For Beginning Date of Reporting Year:	ee Based On Repor	ting Year: Ending Date of Reporting Year:	
Number of AMC appraisers who ha	ave		National
performed an appraisal for the AMC in		X \$25.00 = \$	Registry Fee
connection with a covered transac in Nebraska during the reporting y			due with reporting form
		saction secured by the consumer's principal dwe	
National Registry Fee	\$		
Nebraska Processing Fee	+	350.00	
Total Fees Due with Reporting For	m \$		
	1C in connection with me,	Registry Fee, the AMC must also provide a list of a covered transaction in Nebraska during the	* *

- (3) Number of appraisals performed,
- (4) Earliest appraisal submission date, and
- (5) Latest appraisal submission date.

CERTIFICATION

I certify that the statements made in this application and all attachments are true and correct to the best of my knowledge and belief, and that I have not suppressed any pertinent information.

Signature of Contact		
Person:	Date:	



DIRECTIONS

- 1. Complete entire application. If required information is not provided, application will be considered invalid and be returned to you.
- 2. Include check or money order for non-refundable \$350 processing fee and calculated national registry fee based on number of AMC appraisers reported x \$25.00.
- 3. Include list of the AMC appraisers who have performed an appraisal for the AMC in connection with a covered transaction in Nebraska during the reporting year
- 4. Mail application and fees to:

NEBRASKA REAL PROPERTY APPRAISER BOARD 301 CENTENNIAL MALL SOUTH, FIRST FLOOR PO BOX 94963 LINCOLN, NE 68509-4963

Street address for FedEx or UPS is 301 CENTENNIAL MALL SOUTH, FIRST FLOOR, LINCOLN NE 68509

5. Questions or concerns may be directed to NRPAB staff at 402-471-9015 or nrpab.amc@nebraska.gov